

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <b>09/744169</b>		FILING DATE <b>19 APR 2001</b>	
						APPLICANT(S) <i>Geary</i>			
CLAIMS									
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT					
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			1						
TOTAL DEP.			14						
TOTAL CLAIMS			15						
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